

PART B - FEE(S) TRANSMITTAL



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| Margaret Miron | (Depositor's name) |
|----------------|--------------------|
| Marer Mison | (Signature) |
| 618104 | ` (Date) |
| | |

| ١[| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|----|-----------------|-------------|----------------------|---------------------|------------------|
| | 10/081,318 | 02/21/2002 | Hans Jaeger | 770P01 0685-US(PAR) | 3830 |

TITLE OF INVENTION: SEPARATOR

| APPLN. TYPE | SMALL ENTITY | ISSUE FI | EE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|--|--------------|----------|--|--|------------------|------------|
| nonprovisional | NO | \$1330 | + | \$300 | \$1630 | 07/29/2004 |
| EXAMINER | | ART UN | IT | CLASS-SUBCLASS |] | |
| SCHLAK, DANIEL K | | 3653 | • | 271-220000 | _ | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or 1 Perman & Green, | | |
| ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | attorney or 2 | |
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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ascom Hasler Mailing Systems, Inc.

Shelton, CT

Please check the appropriate assignee category or categories (will not be printed on the patent); U individual Corporation or other private group entity

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Director for Patents is requested to apply the Issue fee and Publication Fee (if any) of 12 re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Joseph V. Gamberdell, Jr (Date)

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